

**DIABETES TREATMENT AND MANAGEMENT - MANAGED CARE  
2000 GENERAL SESSION and 2004 AMENDMENTS  
UTAH State LEGISLATURE**

**Bill Sponsor:** Howard C. Nielson

**Purpose:** AN ACT RELATING TO INSURANCE; REQUIRING THE COMMISSIONER TO ESTABLISH MINIMUM STANDARDS OF COVERAGE FOR DIABETES; REQUIRING A REPORT; PROVIDING A SUNSET REPEAL DATE; (*Note: "Sunset repeal date" was repealed effective July 1, 2004*) AND PROVIDING AN EFFECTIVE DATE.

**This act amends:**

63-55b-131, as renumbered and amended by Chapter 21, Laws of Utah 1999

**This act enacts:**

31A-22-625, Utah Code Annotated 1953

**Section 31A-22-625**

31A-22-625. Coverage of diabetes.

- (1) As used in this section, "diabetes" includes individuals with:
  - (a) complete insulin deficiency or type 1 diabetes;
  - (b) insulin resistance with partial insulin deficiency or type 2 diabetes;and
  - (c) elevated blood glucose levels induced by pregnancy or gestational diabetes.
- (2) The commissioner shall establish, by rule, minimum standards of coverage for diabetes for disability insurance policies that provide a health insurance benefit before July 1, 2000.
- (3) In making rules under Subsection (2), the commissioner shall require rules:
  - (a) with durational limits, amount limits, deductibles, and coinsurance for the treatment of diabetes equitable or identical to coverage provided for the treatment of other illnesses or diseases; and
  - (b) that provide coverage for:
    - (i) diabetes self-management training and patient management, including medical nutrition therapy as defined by rule, provided by an accredited or certified program and referred by an attending physician within the plan and consistent with the health plan provisions for self- management education:
      - (A) recognized by the federal Health Care Financing Agency; or
      - (B) certified by the Department of Health; and
    - (ii) the following equipment, supplies, and appliances to treat diabetes when medically necessary:
      - (A) blood glucose monitors, including those for the legally blind;
      - (B) test strips for blood glucose monitors;
      - (C) visual reading urine and ketone strips;
      - (D) lancets and lancet devices;
      - (E) insulin;

- (F) injection aides, including those adaptable to meet the needs of the legally blind, and infusion delivery systems;
- (G) syringes;
- (H) prescriptive oral agents for controlling blood glucose levels; and
- (I) glucagon kits.

(4) (*Insurance Commissioner report*)

(a) Before October 1, 2003, the commissioner shall report to the Health and Human Services Interim Committee on the effects of Section 31A-22-625. The report shall be based on three years of data and shall include, to the extent possible:

- (i) a review of the rules established under Subsection (3);
- (ii) the change in availability of coverage resulting from this section;
- (iii) the extent to which persons have been benefited by the provisions of this section; and
- (iv) the impact of this section on premiums.

(b) The Legislature shall consider the results of the report under Subsection (4)(a) when determining whether to reauthorize the provisions of this section. (*Provisions of this section were reauthorized effective July 1, 2004*)

63-55b-131

Section 2. Section 63-55b-131 is amended to read:

63-55b-131. Repeal dates -- Title 31A.

(1) Section 31A-22-625 is repealed July 1, 2004.

(2) Section 31A-23-315 is repealed July 1, 2001.

Section 3. Effective date.

This act takes effect on July 1, 2000.